



King County
Department of Development and Environmental Services
Land Use Services Division
900 Oakesdale Avenue Southwest
Renton, Washington 98055-1219
206-296-6600 TTY 206-296-7217

CLEARING AND GRADING PERMIT APPLICATION WORKSHEET

For alternate formats, call 206-296-6600.

General Instructions

Part I of this form must be completed prior to scheduling a pre-application meeting with Land Use Services Division (LUSD). Call LUSD Site Development Services Section at 206-296-6600 or 206-296-6759. A completed JARPA or Forest Practices application may be submitted in lieu of completing Part I.

Part II of this form must be completed by DDES staff prior to application.

Part III through **VI** of this form will be completed by DDES staff after the application has been filed.

PART I

Project Name: _____ Location: _____

Street Address: _____

Description of Project:

Applicant: _____

Address 1: _____

Address 2: _____

Phone No.: _____ E-mail: _____

Owner: _____

Address 1: _____

Address 2: _____

Phone No.: _____ E-mail: _____

Note: If the applicant is other than the owner, authorization from the legal owner must be provided.

Agent: _____

Address 1: _____

Address 2: _____

Phone No.: _____ E-mail: _____

PROJECT CHARACTERISTICS

Total Area Cleared/Graded: _____ ac

Total New Impervious Surface: _____ s.f.

Total New Pervious Surface: _____ s.f.

Volume of Excavation: _____ c.y.

Volume of Fill (Exported): _____ c.y.

Volume of Fill (Imported): _____ c.y.

PROPERTY INFORMATION

Parcel No.: _____ Current Zoning: _____

Community Plan: _____ Size: _____ ac

Shoreline Designation: _____ Thomas Guide: _____

Is the property located within any of the following:

a. A vested Plat? ☐ Yes ☐ No If yes, describe:

b. Area subject to clearing restrictions? ☐ Yes ☐ No If yes, describe:

c. Area subject to other property specific development restrictions? ☐ Yes ☐ No If yes, describe:

Is this property enrolled in current use taxation as forest, farm or open space? ☐ Yes ☐ No If yes, describe:

Has a farm plan, rural stewardship plan or forest management plan been prepared for this parcel? ☐ Yes ☐ No If yes, describe:

Are there any native growth, utility or access easements or other encumbrances that may affect development of this property?

☐ Yes ☐ No If yes, describe:

CERTIFICATION

I, _____, hereby certify that I am the/an owner, or am an authorized agent of _____, a corporation or other business association authorized to do business in the State of Washington, which is the sole owner of the property that is the subject of this application. If I, or the corporation or business association, am/is not the sole owner of the property, I certify that I or this corporation/business association am/is authorized to represent all other owners of the property.

I further certify that to the best of my knowledge, the critical areas in the development proposal site have not been illegally altered and that the applicant has not previously been found in violation of critical areas regulations for any property in King County, or alternatively, that if there have been any violations, such violations have been cured to the satisfaction of King County.

I further certify that all easements, deed restrictions, or other encumbrances restricting the use of the property are shown on the site plans submitted with this application.

I further certify that I am familiar with King County's Community Trails Preservation Program and ☐ am / ☐ am not interested in granting a voluntary easement for a rural equestrian trail.

I certify under penalty of perjury and under the laws of the State of Washington the information filed with this application is true and correct. I understand that signing and submitting this application authorizes DDES staff to inspect the site at any reasonable time for the purpose of permit review.

Applicant Signature: _____ Date: _____

PART II This portion of the worksheet will be completed by the Site Development Services Section.

Permit Type: _____ Inspection Area: _____

Submittal Requirements

Quantity: _____ Description: _____

_____*Application Worksheet/Certification
____**Grading Plan
____Environmental Checklist
____Environmental Determination
____Quantity Calculations
____Drainage Plan/Calcs
____Critical Areas Studies
____Soil Amendment Plan
____Certification and Transfer of Applicant Status
____Legal Description (may be included on site plan)
____Variance/Reasonable Use Exception
____Application Fee Worksheet
____Payment Schedule
____Other: _____

**Minimum payment due
At Application Submittal
\$ _____**
**Subsequent payments
subject to approved
payment schedule**
(review of application will not
commence until all review
fees are paid)

* Application Worksheet is not required if a completed JARPA or FPA is submitted with application.

** Grading plan shall include at a minimum the following information unless specifically waived: vicinity, topography, dimensions, clearing limits, open space, NGPE's, conservation easements, drainage systems, buildings, structures, landscape and restoration plans, critical areas and associated buffers and other information as may be required by the director.

For purposes of this application, the following items are considered waived unless specifically requested above: Fire District receipt, current Certificate of Water Availability, proof that the lot(s) are recognized as separate lots, Certificate of Sewer Availability or site percolation date with preliminary Seattle King County Health Department Approval, Certificate of Future Connection for Sewer or Water if in Urban growth area, and Certificate of Transportation Concurrence.

This completed form must be signed by a representative of the Site Development Services Section and must accompany the completed permit application or the application will not be accepted. This approval includes a waiver for purposes of application, those items more specifically noted above.

DDES Staff Signature: _____ Date: _____

PART III This portion of the worksheet will be completed by the Site Development Services Section staff.

Project Name: _____ Permit Number: _____

Have critical area reports been prepared for this or adjoining properties? ☐ Yes ☐ No
Has a critical area notice on title been recorded on this or adjoining properties? ☐ Yes ☐ No
Is the site located in SO-220/NS-P23? ☐ Yes ☐ No TREES 1/TREES 2? ☐ Yes ☐ No

Have any critical areas been mapped on GIS or other databases for this or adjoining properties? ☐ Yes ☐ No

Identify below and attach any relevant maps/printouts to this report.

Critical area	Site Contains		Site Abuts		Comments
	Yes?	No?	Yes?	No?	
Wetlands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Aquatic Areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
100-Year Floodplain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Channel Migration Hazard Area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Landslide Hazard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Erosion Hazard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Seismic Hazard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Coal Mine Hazard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Steep Slope	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Critical Aquifer Recharge Area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wildlife Habitat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wildlife Corridor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Critical Area Site Conditions

Is there evidence of geologic hazard areas on or adjacent to the project site? ☐ Yes ☐ No If yes, please describe:

Are there any unmapped wetlands or aquatic areas on or adjacent to the project? ☐ Yes ☐ No If yes, please describe:

Does the site contain or abut unmapped wildlife habitat or corridors? ☐ Yes ☐ No If yes, please describe:

Part IV This portion of the worksheet will be completed by the Site Development Services Section staff.

DRAINAGE/TRAFFIC

Does the project add more than 2,000 sq. ft. of new impervious surface?..... ☐ Yes ☐ No... More than 10,000? ... ☐ Yes ☐ No
Does the project add more than 7,000 sq. ft. of new pervious surface? ☐ Yes ☐ No... More than 70,000? ... ☐ Yes ☐ No

Are there mapped or disclosed closed depressions within the project boundary? ☐ Yes ☐ No
Is the project within or adjacent to a flood hazard area? ☐ Yes ☐ No
Is the project within or adjacent to a Critical Drainage Area? ☐ Yes ☐ No

Does the project propose to construct/modify a drainage ditch/pipe that is 12 inches in size/depth, or receives runoff from a drainage pipe/ditch that is 12 or more inches in size? ☐ Yes ☐ No
Is this a redevelopment project proposing greater than \$100,000 of improvements to a high use site? ☐ Yes ☐ No
Is this a redevelopment project that exceeds 50% of the assessed valuation of the existing site improvements and collectively involves 5,000 sq. ft. or more of new or replaced impervious surfaces? ☐ Yes ☐ No
Have there been any drainage complaints filed on this or adjoining properties? ☐ Yes ☐ No
Does any aspect of this proposed project connect to a county or state road or right-of-way? ☐ Yes ☐ No
Will this project create more than one access point (double driveway) onto a road? ☐ Yes ☐ No
Are there any ROW improvements (sight distance clearing, utilities, etc.) needed or proposed? ☐ Yes ☐ No
Approximately how many truck trips will be generated by this project? _____ Duration? _____

Drainage/traffic Site Conditions

Describe existing site drainage: _____
Describe downstream drainage and condition: _____
Describe groundwater conditions: _____
Describe existing road network including site distance? _____
Are there other site issues suggesting engineering or traffic review is warranted or required? ☐ Yes ☐ No If yes, describe.

Part V This portion of the worksheet will be completed by the Site Development Services Section staff.

GENERAL SITE CONDITIONS

Briefly describe the site:

Topography:

Vegetation:

Wildlife and/or habitat:

Describe soil types observed/Mapped:

Describe existing utilities (hydrants, signs, poles, etc.):

Are there any wells or septic systems in the project vicinity? ☐ Yes ☐ No If so, describe the location:

Describe the project impacts on soil, water, and vegetation:

Is there evidence of un-permitted clearing or grading? ☐ Yes ☐ No If so, describe:

Part VI This portion of the worksheet will be completed by the Site Development Services Section staff.

OTHER CONSIDERATIONS

Is this project subject to review under the State Environmental Policy Act? ☐ Yes ☐ No If not, explain why:

Will any structures be constructed as part of this project? ☐ Yes ☐ No If yes, describe:

Is the proposed use associated with this project allowed within this zone? ☐ Yes ☐ No If not, explain why:

Will any of the following permits or approvals be required to undertake this project?

Permit / Approval			Comments
Building Permit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Demolition Permit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
ROW Permit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
WSDOT Access Permit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Critical Area Exception?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Shorelines SDP or Ex.?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Forest Practice Permit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
WDFW – HPA?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
NPDES Permit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
404 or Sec 10 Permit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
401 Certification?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Other? - List:			

Will any of the following be required as a condition of issuance of this permit?

Description			Comments
Notice on Title?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Native Area Ret.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Financial Guarantee?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Liability Insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Exception to stds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Other? - List			

DDES Staff Signature: _____ Date: _____

Check out the DDES Web site at www.metrokc.gov/ddes